


Type a plus sign (+) inside this box   
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|   |                        |   |
|---|------------------------|---|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) | Attorney Docket No.    | H 4958 PCT/US   |
|   | First Inventor         | Gabriele Prenger, et al   |
|   | Title                  | METHOD FOR PRODUCING A PACKAGING FILLED WITH TABLETS AND ONE SUCH PACKAGING |
|   | Express Mail Label No. | EV192785512US   |

|   |   |
|---|---|
| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents. | <b>ADDRESS TO:</b> Assistant Commissioner for Patents<br>Box Patent Application<br>Washington, DC 20231 |
|---|---|

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
 (Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
 See 37 CFR 1.77
3. ☒ Specification [Total Pages 27] 1  
 (preferred arrangement set forth below)  
 - Descriptive title of the invention  
 - Cross References to Related Applications  
 - Statement Regarding Fed sponsored R&D  
 - Reference to sequence listing, a table, or a computer program listing appendix  
 - Background of the invention  
 - Brief Summary of the invention  
 - Brief Description of the Drawings (if filed)  
 - Detailed Description  
 - Claim(s)  
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 8] 1
5. Oath or Declaration [Total Pages 3] 1
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
 (for continuation/divisional with Box 18 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
 Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
 (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. ☐ Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

| ACCOMPANYING APPLICATION PARTS          |  |
|---|--|
| 9. <input checked="" type="checkbox"/>  | Assignment Papers (cover sheet & document(s))  |
| 10. <input type="checkbox"/>            | 37 C.F.R. § 3.73(b) Statement of Power of Attorney<br>(when there is an assignee)                                  |
| 11. <input type="checkbox"/>            | English Translation Document (if applicable)   |
| 12. <input checked="" type="checkbox"/> | Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations        |
| 13. <input type="checkbox"/>            | Preliminary Amendment  |
| 14. <input checked="" type="checkbox"/> | Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized)  |
| 15. <input type="checkbox"/>            | Certified Copy of Priority Document(s)<br>(If foreign priority is claimed)   |
| 16. <input type="checkbox"/>            | Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br>Applicant must attach form PTO/SB/35 or its equivalent |
| 17. <input checked="" type="checkbox"/> | Other: International Search Report   |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No: PCT/EP01/14644 filed December 13, 2001

Prior application information: Examiner

Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

#### 19. CORRESPONDENCE ADDRESS

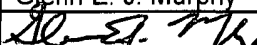
☒ Customer Number or Bar Code Label

00423

or ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

|         |                                   |           |              |          |              |  |
|---------|-----------------------------------|-----------|--------------|----------|--------------|--|
| Name    | Henkel Corporation                |           |              |          |              |  |
| Address | Law Department                    |           |              |          |              |  |
|         | 2500 Renaissance Blvd., Suite 200 |           |              |          |              |  |
| City    | Gulph Mills                       | State     | PA           | Zip Code | 19406        |  |
| Country | US                                | Telephone | 610-278-4926 | Fax      | 610-278-6548 |  |

|                   |   |                                   |               |
|-------------------|---|-----------------------------------|---------------|
| Name (Print/Type) | Glenn E. J. Murphy  | Registration No. (Attorney/Agent) | 33,539        |
| Signature         |  | Date                              | June 23, 2003 |


Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

21903 U.S. PTO  
10/601440  
06/23/03

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|  |                    |                          |                          |
|--|--------------------|--------------------------|--------------------------|
| <b>FEE TRANSMITTAL</b><br><b>for FY 2003</b><br><i>Patent fees are subject to annual revision.</i> |                    | <b>Complete if Known</b> |                          |
|  |                    | Application Number       | To be assigned           |
|  |                    | Filing Date              | To be assigned           |
|  |                    | First Named Inventor     | Gabriele Prenger, et al. |
|  |                    | Examiner Name            | To be assigned           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27                     |                    | Art Unit                 | To be assigned           |
| <b>TOTAL AMOUNT OF PAYMENT</b>   | <b>(\$1456.00)</b> | Attorney Docket No.      | H 4958 PCT/US            |

|   |                  |  |                    |  |
|---|------------------|--|--------------------|--|
| <b>METHOD OF PAYMENT</b> (check all that apply)   |                  | <b>FEE CALCULATION</b> (continued)                         |                    |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account: Order   |                  | <b>3. ADDITIONAL FEES</b>                                  |                    |  |
| Deposit Account Number: 01-1250 order nos. 03-0329 and 03-032.01  |                  |  |                    |  |
| Deposit Account Name: Henkel Corporation  |                  |  |                    |  |
| The Commissioner is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. |                  |  |                    |  |
| <b>FEE CALCULATION</b>  |                  |  |                    |  |
| <b>1. BASIC FILING FEE</b>  |                  |  |                    |  |
| Large Entity Fee  | Small Entity Fee | Fee Description  | Fee Paid           |  |
| Code (\$)   | Code (\$)        |  |                    |  |
| 1001 740  | 2001 370         | Utility filing fee   | 750                |  |
| 1002 330  | 2002 165         | Design filing fee  |                    |  |
| 1003 510  | 2003 255         | Plant filing fee   |                    |  |
| 1004 740  | 2004 370         | Reissue filing fee   |                    |  |
| 1005 160  | 2005 80          | Provisional filing fee                                     |                    |  |
| <b>SUBTOTAL (1)</b>   |                  |  | <b>(\$ 750.00)</b> |  |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b>  |                  |  |                    |  |
| Total Claims  | Extra Claims     | Fee from below   | Fee Paid           |  |
| 57  | -20**= 37        | X \$18.00 =  | 666.00             |  |
| Independent Claims  | 3                | - 3**= 0   | X \$84.00 =        |  |
| Multiple Dependent  |                  | \$280.00 =   | 0                  |  |
| Large Entity Fee  | Small Entity Fee | Fee Description  |                    |  |
| Code (\$)   | Code (\$)        |  |                    |  |
| 1202 18   | 2202 9           | Claims in excess of 20                                     |                    |  |
| 1201 84   | 2201 42          | Independent claims in excess of 3                          |                    |  |
| 1203 280  | 2203 140         | Multiple dependent claim, if not paid                      |                    |  |
| 1204 84   | 2204 42          | ** Reissue independent claims over original patent         |                    |  |
| 1205 18   | 2205 9           | ** Reissue claims in excess of 20 and over original patent |                    |  |
| <b>SUBTOTAL (2)</b>   |                  |  | <b>(\$) 666.00</b> |  |
| ** or number previously paid, if greater; For Reissues, see above   |                  |  |                    |  |
|   |                  | <b>Other fee (specify)</b>                                 |                    |  |
|   |                  |  |                    |  |
|   |                  | <b>* Reduced by Basic Filing Fee Paid</b>                  |                    |  |
|   |                  | <b>SUBTOTAL (3)</b>  |                    |  |
|   |                  | <b>(\$ 40.00)</b>  |                    |  |

|                     |   |                                 |               |
|---------------------|---|---------------------------------|---------------|
| <b>SUBMITTED BY</b> |   | <b>Complete (if applicable)</b> |               |
| Name (Print/Type)   | Glenn E.J. Murphy   | Registration No.                | 33,539        |
| Signature           |  | Telephone                       | 610-278-4926  |
|                     |   | Date                            | June 23, 2003 |

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.